



WISCONSIN

**DEPARTMENT OF WORKFORCE DEVELOPMENT**

Division of Economic Support  
Bureau of Welfare Initiatives

**TO: Economic Support Supervisors  
Economic Support Lead Workers  
Training Staff  
FSET Administrative and/or Provider Agencies  
Child Care Coordinators  
W-2 Agencies**

**FROM: Stephen M. Dow  
Program Implementation Team  
Policy Analysis and Program Implementation Section**

**SUBJECT: CARES – MEDICAL ASSISTANCE/BADGERCARE FIXES**

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**EFFECTIVE DATE:** Changes described in this memo are planned for CARES production early in the week of 10/25/99.

**PURPOSE**

This memo provides descriptions of several actions to be implemented in CARES in late October for Medical Assistance (MA) and BadgerCare (BC).

**PREMIUM INCREASES**

According to BC policy an increase in Premium amount is considered a decrease in Benefits. Until now, CARES sometimes incorrectly allowed confirmation for the subsequent month when a premium increased. CARES also incorrectly prevented confirmation when an increase in premium occurred on a multiple month determination at intake.

We have changed CARES so confirmation of an AG for a run of eligibility after Adverse Action for the subsequent month cannot be confirmed. This will comply with 10 day notice requirements. Any month can be confirmed if the case is in Intake mode even when there is an increase in a premium payment and multiple months of eligibility are being determined initially.

**INCORRECT BADGERCARE OPENINGS**

BC policy provides that an individual must request Medical Assistance in order to be eligible for BC. In the past, if a household requested MA but at least one person in the household was **not** requesting MA, but did request BC, that person(s) (the one not requesting MA) would incorrectly pass for BC.

That problem is fixed. Within a BC AG, any person who has not requested MA will correctly fail for reason code 295 (you must request Medicaid to receive BC). Note that ACPA does not have to show a request for HS as long as MA is requested; a request for MA is deemed to be a request for HS.

**BWSP OPERATIONS MEMO**

**No.: 99-79**

**File: 1260  
2790**

**Date: 10/22/99**

**Non W-2 [X] W-2 [ ] CC [ ]**

**PRIORITY: URGENT**

***BADGERCARE NOT REQUESTED***

Reason code 114 (primary person requested to exclude this person) has never been set for BC even though, in certain circumstances, it should have been.

This is now fixed. When BC is not requested for a person, that person will now correctly fail for reason 114 as long as there is at least one person in the AG who is nonfinancially eligible.

***“NO PERSON MEETS PROGRAM REQUIREMENTS”***

Until now, BC was sometimes being incorrectly denied for reason 028 (no person meets program requirements). This was happening when:

1. BC was already open, **and**
2. The worker runs without dates and,
3. The system runs for multiple months (at least 3) for some other assistance group or program of assistance ( for instance for FS Z).

This problem has now been fixed. When a BC determination is being done under these circumstances, BC will be built and tested correctly.

***BADGERCARE ELIGIBILITY TEST***

There has also been a problem with BC not being correctly built and tested for a person who failed other types of MA and whose participation status was set to something other than “XA” or “CA”. For example, a stepparent’s participation status in MA R would be “TD”, and he would not be tested for BC.

This is now fixed.

***SCREEN AGPT***

1. AGPT now displays the history of each confirmed premium amount due. This includes months that are confirmed for one amount and then rerun and confirmed with a premium increases or decrease. AGPT history displays the last confirmed run first, followed by prior confirmations of the same benefit month. This fix will not correct prior display problems. Workers can verify changes to premium amounts on EDSNET 'BD' online screen. Workers may also rerun SFED and confirm past BC benefits to correct existing display problems on AGPT.
2. We have fixed problems that occurred when a lower premium amount was confirmed for a month that had premium recorded as paid.
3. Also AGPT was not getting updated correctly for some cases that had eligibility determined by running with dates. We have fixed this problem.

***ALERTS***

You will now receive an alert #288 when EDS notifies CARES that a person has access to major medical insurance where the employer pays 80% or more of the premium for a family plan.

You will also receive alert #289 when EDS notifies CARES that a person is covered by major medical insurance.

These cases will be run at the next adverse action to end BC benefits for those persons with access to coverage. However, the adverse action program will not be able to establish a deductible period for those persons no longer eligible for BC. Run SFED for these cases whenever you receive the alert to correctly determine everyone’s eligibility.

**SCREEN AGRR FIXED**

Restrictive re-enrollment periods were not being set in some cases wherein eligibility had been determined by running with dates. That problem is fixed.

**ARREARS**

CARES will now correctly require BC cases owing a past premium to pay "arrearages owed" before allowing confirmation of BC eligibility.

**SCREEN AGPC**

We made fixes to the scheduling of the AGPC screen to be consistent with policy.

**CONTACT**

BWSP/CARES Policy Call Center

Email:

[carpolcc@dwd.state.wi.us](mailto:carpolcc@dwd.state.wi.us)

Phone:

608-261-6317

Fax:

608-261-6968